UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____	2 Serial/Patent 08/517,407

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			$
	Amendment			$
	Extension of Time			$
	Notice of Appeal/Appeal			$
	Petition			$
	Issue			$
	Cert of Correction/Terminal Disc.			$
	Maintenance			$
	Assignment			$
	Other			$
			7 TOTAL AMOUNT OF REFUND	$

8 TO BE REFUNDED BY: Refund Ref: 08/25/1995 39322790

10 REASON:	
	Overpayment
	Duplicate Payment
	No Fee Due (Explanation):

Treasury Check
Credit Card Refund Total: $500.00

Credit Deposit A/C #:

9 Ac Exp.: XXXXXXXXXXX1006 [ ][ ]--[ ][ ][ ][ ]

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: _____ TITLE: _____

SIGNATURE: _____ PHONE: _____ -500.00 OP

02 FC:1632

OFFICE: _____

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THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____ DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

FORM PTO 1577
(01/90)

BEST AVAILABLE COPY